

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO. 101719696

FILING DATE 11/21/03

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT							
	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	/						51					
2		/					52					
3	/						53					
4	/						54					
5	/						55					
6	/						56					
7	2						57					
8	/						58					
9	/						59					
10	/						60					
11	/						61					
12	/						62					
13	/						63					
14							64					
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41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	/											
TOTAL DEP.	13											
TOTAL CLAIMS	14											